

# STATE OF NEVADA DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

1100 E. William Street, Suite 101 Carson City, Nevada 89701 www.dhcfp.nv.gov MICHAEL J. WILLDEN

Director

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# NOTICE OF OPEN PUBLIC MEETING

The Division of Health Care Financing and Policy (DHCFP) Pharmacy and Therapeutics Committee will conduct a public meeting on **September 27, 2012**, beginning at **1:00 p.m.** at the following location:

Nevada State Health Division 3811 W. Charleston Blvd, Suite 112 Las Vegas, NV 89102

Some members will be attending the meeting via video conference at Nevada State Health Division, 4150 Technology Way, Suite 300, Carson City, Nevada 89506 (public seating is limited).

Reasonable efforts will be made to assist and accommodate physically challenged persons desiring to attend the meeting. Please call Rita Mackie at: 775-684-3681 or email <a href="mackie@dhcfp.nv.gov">rmackie@dhcfp.nv.gov</a> in advance, but no later than two working days prior to the meeting, so that arrangements may be conveniently made.

Items may be taken out of order.

Items may be combined for consideration by the public body.

Items may be pulled or removed from the agenda at any time.

Public comment is limited to 5 minutes per individual, organization, or agency, but may be extended at the discretion of the Chairperson.

### <u>AGENDA</u>

- I. Call to Order and Roll Call
- II. Public Comment

No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on the agenda as an item upon which action can be taken.

III. <u>For Possible Action</u>: Review and Approval of the March 22, 2012 and June 28, 2012 Meeting Minutes

- IV. Status Update by DHCFP
  - A. Public Comment
  - B. Program Updates
- V. Established Drug Classes
  - A. Acne Agents: Topical, Benzoyl Peroxide, Antibiotics and Combination Products
    - 1. Public Comment
    - 2. Drug Class Review Presentation SXC Health Solutions
    - 3. **For Possible Action**: Committee Discussion and Action
      - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
      - b) Identify Exclusions/Exceptions for Certain Patient Groups
    - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
    - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for inclusion on the PDL
  - B. Analgesics/Anesthetics: Topical
    - 1. Public Comment
    - 2. Drug Class Review Presentation SXC Health Solutions
    - 3. **For Possible Action**: Committee Discussion and Action
      - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
      - b) Identify Exclusions/Exceptions for Certain Patient Groups
    - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
    - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for Inclusion on the PDL
  - C. Antibiotics: Cephalosporin 3<sup>rd</sup> Generation
    - 1. Public Comment
    - 2. Drug Class Review Presentation SXC Health Solutions
    - 3. **For Possible Action**: Committee Discussion and Action
      - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
      - b) Identify Exclusions/Exceptions for Certain Patient Groups
    - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
    - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for Inclusion on the PDL
  - D. Anticoagulants: Oral
    - 1. Public Comment
    - 2. Drug Class Review Presentation SXC Health Solutions
    - 3. **For Possible Action**: Committee Discussion and Action

- a) Approve Clinical/Therapeutic Equivalency of Agents in Class
- b) Identify Exclusions/Exceptions for Certain Patient Groups
- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for inclusion on the PDL
- E. Antipsychotics: Atypical
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- F. Antivirals: Hepatitis C Protease Inhibitors
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- G. Cardiovascular: Antihyperlipidemics, Statins and Statin Combinations
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. For Possible Action: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- H. Central Nervous System: ADHD/Stimulants
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions

- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC
   Health Solutions and the Division of Health Care Financing and Policy
- For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL

## I. Electrolyte Depleters

- 1. Public Comment
- 2. Drug Class Review Presentation SXC Health Solutions
- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- J. Gastrointestinal Agents: Proton Pump Inhibitors
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for Inclusion on the PDL

#### K. Growth Hormone Agents

- 1. Public Comment
- 2. Drug Class Review Presentation SXC Health Solutions
- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- L. Immunomodulators: Injectable
  - 1. Public Comment

- 2. Drug Class Review Presentation SXC Health Solutions
- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL

# M. Ophthalmic Quinolones

- 1. Public Comment
- 2. Drug Class Review Presentation SXC Health Solutions
- 3. For Possible Action: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC
   Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL

# N. Respiratory: Inhaled Anticholinergic Agents

- 1. Public Comment
- 2. Drug Class Review Presentation SXC Health Solutions
- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC
   Health Solutions and the Division of Health Care Financing and Policy
- 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL

## O. Respiratory: Short Acting Beta Adrenergics-Inhalers/Nebulizers

- 1. Public Comment
- 2. Drug Class Review Presentation SXC Health Solutions
- 3. **For Possible Action**: Committee Discussion and Action
  - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
  - b) Identify Exclusions/Exceptions for Certain Patient Groups
- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL

- P. Cardiovascular: Antihyperlipidemics, Cholesterol Absorption Inhibitors
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. <u>For Possible Action</u>: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- Q. Pulmonary Arterial Hypertension Agents: Oral Agents
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. For Possible Action: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL

## VI. ANNUAL REVIEW-DRUG CLASSES BEING REVIEWED DUE TO RELEASE OF NEW DRUGS

- A. Analgesics: Tramadol and Related Drugs
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC
     Health Solutions and the Division of Health Care Financing and Policy
  - 5. <u>For Possible Action</u>: Committee Discussion and Approval of Drugs for inclusion on the PDL
- B. Central Nervous System: Anticonvulsants, Misc
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC
     Health Solutions and the Division of Health Care Financing and Policy

- For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- C. Central Nervous System: Sedative Hypnotics
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- D. Erythropoiesis Stimulating Proteins
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. For Possible Action: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- E. Gastrointestinal Agents: Pancreatic Enzymes
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- F. Respiratory: Intranasal Steroids
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups

- 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
- For Possible Action: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- G. Urinary Tract Antispasmodics
  - 1. Public Comment
  - 2. Drug Class Review Presentation SXC Health Solutions
  - 3. **For Possible Action**: Committee Discussion and Action
    - a) Approve Clinical/Therapeutic Equivalency of Agents in Class
    - b) Identify Exclusions/Exceptions for Certain Patient Groups
  - 4. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy
  - 5. **For Possible Action**: Committee Discussion and Approval of Drugs for Inclusion on the PDL
- VII. ANNUAL REVIEW Drug Classes Without Proposed Changes
  - A. Public Comment
  - B. Presentation of Recommendations for Preferred Drug List (PDL) Inclusion by SXC Health Solutions and the Division of Health Care Financing and Policy Without Changes
    - 1. Acne Agents: Topical, Retinoid Agents and Combinations
    - 2. Alzheimer's Agents
    - 3. Analgesics: Long Acting Narcotics
    - 4. Anaphylaxis: Self-Injectable Epinephrine
    - 5. Antibiotics: Cephalosporin 2<sup>nd</sup> Generation
    - 6. Antibiotics: Macrolides
    - 7. Antibiotics: Quinolones 2<sup>nd</sup> Generation
    - 8. Antibiotics: Quinolones 3<sup>rd</sup> Generation
    - 9. Anticoagulants: Injectable
    - 10. Antidepressants: SSRIs
    - 11. Antidepressants: Other
    - 12. Antiemetics: Oral, 5-HT<sub>3</sub>
    - 13. Antifungals: Onychomycosis Agents
    - 14. Antihistamines: Second Generation
    - 15. Antihyperuricemics: Xanthine Oxidase Inhibitors for Gout
    - 16. Anti-Migraine Agents: Non-ergot Dopamine Agonists
    - 17. Antiparkinson's Agents: Non-ergot Dopamine Agonists
    - 18. Antivirals: Hepatitis C Non-Pegylated Interferons
    - 19. Antivirals: Hepatitis C Pegylated Interferons
    - 20. Antivirals: Hepatitis C Ribavirins
    - 21. Benign Prostatic Hyperplasia (BPH) Agents: 5-alpha-reductace Inhibitors

- 22. Benign Prostatic Hyperplasia (BPH) Agents: Alpha-blockers
- 23. Bone Ossification Agents: Bisphosphonates
- 24. Cardiovascular: ACE Inhibitors and Diuretic Combinations
- 25. Cardiovascular: Angiotensin II Receptor Blockers and Diuretic Combinations
- 26. Cardiovascular: Antihyperlipidemics, Bile Acid Sequestrants
- 27. Cardiovascular: Antihyperlipidemics, Cholesterol Absorption Inhibitors
- 28. Cardiovascular: Antihyperlipidemics, Niacin Agents
- 29. Cardiovascular: Beta Blockers
- 30. Cardiovascular: Calcium Channel Blockers and Combinations
- 31. Cardiovascular: Direct Renin Inhibitors and Combinations
- 32. Central Nervous System: Anticonvulsants, Barbiturates
- 33. Central Nervous System: Anticonvulsants, Hydantoins
- 34. Diabetic Agents: alpha-glucosidase inhibitor
- 35. Diabetic Agents: Amylin Analogs
- 36. Diabetic Agents: Biguanides
- 37. Diabetic Agents: Incretin Mimetics
- 38. Diabetic Agents: Insulin Products
- 39. Diabetic Agents: Meglitinides and Combinations
- 40. Diabetic Agents: Sulfonylureas
- 41. Diabetic Agents: Thiazolidinediones
- 42. Gastrointestinal Agents: H<sub>2</sub>RA's
- 43. Gastrointestinal Agents: Ulcerative Colitis
- 44. Herpetic Antiviral Agents
- 45. Herpetic Antiviral Agents: Topical
- 46. Immunomodulators: Topical
- 47. Impetigo Agents: Topical
- 48. Leukotriene Modifiers
- 49. Multiple Sclerosis Agents: Disease Modifying
- 50. Multiple Sclerosis Agents: Specific Symptomatic Treatment
- 51. Nasal Calcitonins
- 52. Ophthalmic Antibiotics: Macrolides
- 53. Ophthalmic Antihistamines
- 54. Ophthalmic Non-steroidal anti-inflammatory agents
- 55. Ophthalmic Glaucoma Agents
- 56. Otic Fluoroquinolones
- 57. Progestins for Cachexia
- 58. Psoriasis Agents: Topical
- 59. Pulmonary Arterial Hypertension agents: Inhaled Agents
- 60. Respiratory: Oral COPD Agents
- 61. Respiratory: Inhaled Corticosteroids/Nebulizers
- 62. Respiratory: Long-Acting Beta Adrenergics
- 63. Skeletal Muscle Relaxants
- 64. Respiratory: Intranasal Antihistamines and Combinations

- 65. Cardiovascular: Antihyperlipidemics, Triglycerides Lowering Agents
- C. <u>For Possible Action</u>: Committee Discussion and Approval of Drug Classes Without Changes to the PDL
- VIII. Report by SXC on New Drugs to Market, New Generic Drugs to Market, and New Line Extensions
- IX. Review of Next Meeting Location, Date, and Time
- X. Public Comment
- XI. Adjournment

This notice and agenda has been posted on or before 9:00 a.m. on the third working day before the meeting at the following locations:

Notice of this meeting will be available on or after the posting date of this Agenda at the DHCFP Web site (www.dhcfp.nv.gov)

Posting of the Agenda will be at the Nevada Medicaid Central offices in Carson City and Las Vegas; Nevada State Library; Carson City Library; Churchill County Library; Las Vegas Library; Douglas County Library; Elko County Library; Lincoln County Library; Lyon County Library; Mineral County Library; Tonopah Public Library; Pershing County Library; Goldfield Public Library; Eureka Branch Library; Humboldt County Library; Lander County Library; Storey County Library; Washoe County Library; and White Pine County Library and may be reviewed during normal business hours.

If requested in writing, a copy of the action items will be mailed to you or they may be reviewed Monday through Friday from 9:00 a.m. until 5:00 p.m., or at the meeting. Please call at least one day ahead for an appointment for document review. Written comments on the proposed changes may be sent to the DHCFP, 1100 E. William Street, Suite 102, Carson City, NV 89701.

All persons that have requested in writing to receive the Open Meeting Agenda have been duly notified by mail or e-mail.

Anyone presenting documents for consideration during the public comment portion of the meeting must provide sufficient copies for each member of the committee and the official record. Copies are to be distributed at the time of the meeting and should be provided at both meeting locations; DHCFP or its contractor will not distribute public comment information or materials prior to the public meeting.